

	
<p><i>Medicare Today...More Choices, Better Benefits</i></p>	
<p><i>Instructor's Name</i></p> <p><i>Event</i></p> <p><i>Date</i></p>	

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This training module was developed and approved by the Centers for Medicare & Medicaid Services (CMS), the Federal agency that administers Medicare and Medicaid.

It has been designed as a brief presentation for people with Medicare and their families and friends to give an overview of some of the changes legislated by the Medicare Prescription Drug, Improvement, and Modernization Act of 2003. The information in this module was correct at the time of printing (May 2005).

This set of National Medicare & You Training Program materials is not a legal document. The official Medicare program provisions are contained in the relevant laws, regulations, and rulings.

Medicare Has More to Offer

- New preventive services
- Prescription drug plan coverage
- New Medicare Health Plan options
- Extra help for those who need it most

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Beginning in 2005, Medicare is covering more preventive services, and beginning in 2006 Medicare will make prescription drug coverage available to all people with Medicare. These are improvements to the Medicare program. Medicare still offers the same basic coverage along with new benefits and more choices.

Today we'll discuss:

- New preventive benefits
- Prescription drug coverage
- New Medicare Health Plan options, and
- Extra help for those who need it most

New Benefits and Options

- Offers preventive services in 2005
- Makes Medicare prescription drug coverage available January 1, 2006
- Offers new Medicare Health Plan options in 2006

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Coverage for new preventive services began January 1, 2005, and Medicare prescription drug coverage will start January 1, 2006. To help pay for your drug costs, you can enroll in a Medicare prescription drug plan as early as November 15, 2005, for the prescription drug coverage to be effective January 1, 2006.

People with Medicare will have more choices in how they receive their health care with the Medicare Health Plans in 2006.

New Covered Preventive Services

- To help you stay healthy
- Beginning January 2005
 - “Welcome to Medicare” physical exam
 - Cardiovascular screening blood tests
 - Diabetes screening tests

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As we said on the previous slide, beginning January 1, 2005, Medicare now covers some additional preventive services to help you stay healthy. They include:

- A one-time “Welcome to Medicare” physical exam for new Part B enrollees
- Cardiovascular screening blood tests
- Diabetes screening tests

New Medicare Prescription Drug Coverage

- Starts January 1, 2006
- Most people must choose and enroll in a plan to get coverage
 - If you have coverage through an employer or union, check with your benefits administrator
 - Many people with limited incomes and resources will get extra help
- Medicare Health Plans also will offer drug coverage

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Medicare will soon offer insurance coverage for prescription drugs to all people with Medicare, with coverage starting January 1, 2006.

Most people will get coverage through Medicare prescription drug plans, and must choose and enroll in a plan to get coverage.

If you have drug coverage from your former employer or union, check with your benefits administrator before considering a Medicare prescription drug plan. Medicare is working with employers and unions to ensure that people who currently receive drug coverage through their former employer or union can continue to do so.

People with limited incomes and resources may get extra help with their Medicare prescription drug coverage. The amount of help will depend on the amount of your income and resources.

Anyone with Medicare—Part A and/or Part B—can join a plan offered in his or her area. Medicare Health Plans will offer drug coverage to their members.

Medicare Prescription Drug Coverage

- It's important to join a plan when you are first eligible
 - Most people with Medicare need or will come to need prescription drugs to stay healthy
 - Medicare prescription drug coverage will protect you from high out-of-pocket costs
 - Enrolling when first eligible means you pay a lower premium

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It's important to join a plan when you are first eligible. Medical practice has come to rely more and more on new drug therapies to treat chronic conditions and out-of-pocket spending on drugs has steadily increased. Most people with Medicare currently need or will come to need prescription drugs to stay healthy. Medicare prescription drug coverage will protect you from high out-of-pocket costs. For most people, joining when you are first eligible means that you will pay a lower monthly premium than if you wait to join until later.

Medicare Prescription Drug Coverage

- Join November 15 – December 31, 2005
 - Coverage begins January 1, 2006
- Join January 1 – May 15, 2006
 - Coverage begins the month after you join
- Join when first eligible, to pay lowest monthly premium
 - About \$37/month in 2006
- Coverage and costs vary

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You can join a plan offering prescription drug coverage as early as November 15, 2005. If you join by December 31, your coverage will start January 1, 2006. After that, your coverage will begin the month after the month you join.

When you join

You will pay a monthly premium, around \$37 in 2006, and pay part of the cost of your prescriptions, including a copayment and deductible. Your costs will vary depending on which drug plan you choose, and some plans may offer more coverage and additional drugs for a higher monthly premium.

Help for Those Who Need it Most

- Those with lowest incomes pay no premiums or deductibles; small or no copayments
- Those with slightly higher incomes pay a little more
- You may qualify if you are
 - Single and have resources less than \$11,500
 - Married and have resources less than \$23,000
- Some people will automatically qualify
- Others will get an application from Social Security

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As noted earlier, there is extra help available for people with Medicare with limited income and resources to pay for prescription drugs. People with the lowest incomes will pay no premiums or deductibles, and small or no copayments. Those with slightly higher incomes will have a reduced deductible and pay a little bit more out of pocket.

To get this help you must:

- Live in the United States
- Meet the income and resource requirements
- Be enrolled in Medicare

If you are single and your resources (savings, investments, and real estate other than your home) are worth less than \$11,500 or if you are married and your resources are worth less than \$23,000, you may qualify for help with paying the costs of a Medicare prescription drug plan. The Social Security Administration is sending people who may qualify a form to complete and mail in to apply for the extra help. If you don't get one and you think you qualify, you should ask Social Security for an application.

If you are currently receiving benefits from both Medicaid and Medicare, or if you are receiving Supplemental Security Income benefits and Medicare, you do not have to do anything—you will get information in the mail from Medicare telling you that you are eligible for the extra help and what you need to do this fall to enroll in a Medicare prescription drug plan.

More Choices with Medicare Health Plans

- New name for Medicare + Choice plans
- Types of plans
 - Medicare Managed Care Plans
 - Medicare Preferred Provider Organization Plans (PPOs) (new)
 - Medicare Private Fee-for-Service Plans
 - Medicare Special Needs Plans (new)

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What are Medicare Health Plans? Medicare Health Plans give you more health care coverage choices. With Medicare Health Plans, you may have the following choices:

- **Medicare Managed Care Plans**—In most of these plans, you can only go to doctors, specialists, or hospitals on the plan’s list, except in an emergency. This is called the plan’s “network.” You may also have to choose a primary care doctor and get referrals to see a specialist. You may pay lower copayments and get extra benefits, such as coverage for extra days in the hospital.
- **New Medicare Preferred Provider Organization Plans (PPOs)**—In most of these plans, you use doctors, specialists, and hospitals on the plan’s list (network). You can go to doctors, specialists, or hospitals not on the plan’s list, but it may cost extra. You don’t need referrals to see doctors or specialists, or to go to hospitals that aren’t part of the plan’s network. You may pay lower copayments and get extra benefits, such as coverage for extra days in the hospital.
- **Medicare Private Fee-for-Service Plans**—If you join one of these plans, you can go to any doctor or hospital that accepts the payment terms of the plan. The private company, rather than the Medicare program, decides how much it will pay and how much you pay for the services you get. You may get extra benefits, like coverage for extra days in the hospital.
- **New Medicare Special Needs Plans**—These plans may provide more focused health care for specific people. If you join one of these plans, you get all your Medicare health care as well as more focused care to manage a specific disease or condition.

**If you join
*a Medicare Health Plan...***

- You are still in the Medicare program
- You have all your Medicare rights and protections
- You will get all the basic Medicare coverage
- You may get more benefits

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If you join a Medicare Health Plan

- You are still in the Medicare program
- You have all your Medicare rights and protections
- You will get all the basic Medicare coverage
- You may have more benefits, such as coverage for extra days in the hospital. Each plan can decide to provide extra benefits.

Important Dates

New preventive
services begin...



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As we talked about earlier, the three new preventive services began on January 1, 2005. These services include the “Welcome to Medicare” physical exam for people newly enrolled in Part B, cardiovascular screening blood tests, and diabetes screening tests.

Important Dates

If you have limited income and resources, watch your mail for information from Social Security about applying for extra help paying for prescription drugs...



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The Social Security Administration will begin sending out letters in May 2005 to those who have limited income and resources and who may qualify for the extra help with drug plan costs. These letters will be sent out through August 2005.

Important Dates

If you receive
Medicaid or
Supplemental
Security Income
benefits, watch your
mail for a letter
from Medicare...

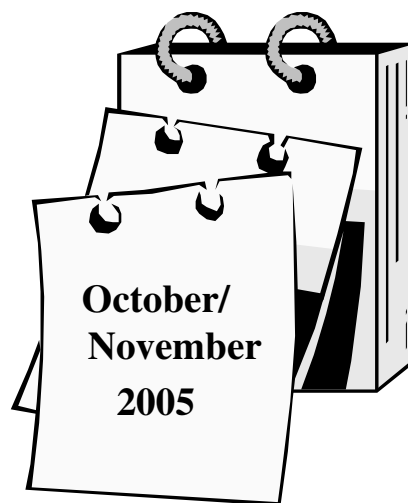


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Medicare will be sending out a letter in May 2005 to people with Medicare who are currently receiving Medicaid benefits, including those with the Medicare Savings Program, or who are receiving SSI (Supplemental Security Income) benefits. These people automatically qualify for the extra help with the costs of Medicare prescription drug coverage.

Important Dates

Watch your mail for the *Medicare & You* handbook, which will have information about the plans in your area



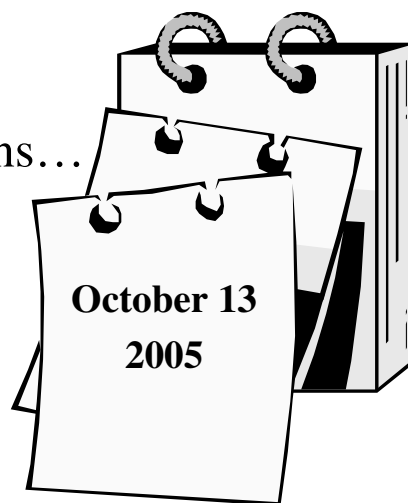
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The *Medicare & You* handbook will contain a lot of information about the new drug coverage, the Medicare Health Plans, and Medicare plans offering drug coverage. The 2006 handbook will be sent out in October 2005.

Important Dates

You can begin to
compare Medicare
prescription drug plans...

- Community groups
- www.medicare.gov
- 1-800-MEDICARE
- SHIP

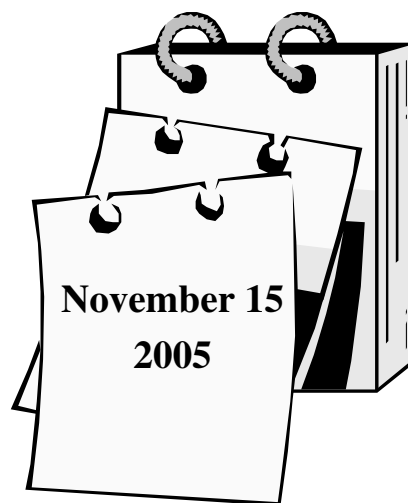


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Plan information will be available on www.medicare.gov for you to review and determine which plans meet your needs. You can work with organizations in your community, visit www.medicare.gov or call 1-800-MEDICARE to get information about plans that are available to you. You can also get free counseling from your State Health Insurance Assistance Program or SHIP. See the *Medicare & You* handbook or visit www.medicare.gov for the phone number of your local SHIP.

Important Dates

You can begin to enroll in Medicare prescription drug plans



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You can begin enrolling in a Medicare prescription drug plan beginning November 15, 2005. Remember, if you have insurance through a current or former employer/union, you can also check with the benefits administrator about your prescription drug coverage options.

Important Dates

Medicare
prescription drug
coverage begins
for those who are
enrolled...



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Prescription drug coverage begins on January 1, 2006, for those who enroll in a plan November 15 through December 31, 2005.

Important Dates

Need to enroll in
a Medicare
prescription drug
plan by...



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You will need to enroll in a Medicare prescription drug plan by May 15, 2006. Remember, it's important to join a plan when you are first eligible. For most people, joining when you are first eligible means you will pay your lowest monthly premium.

For More Information

- *Medicare & You 2006* handbook
- Community groups
- Visit www.medicare.gov
- Call 1-800-MEDICARE (1-800-633-4227)
– TTY 1-877-486-2048
- SHIP

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Detailed information about Medicare prescription drug plans will be available in the fall of 2005. Throughout 2005, Medicare will provide general information to help you get ready, including how to choose and join a plan that meets your needs. In the fall of 2005, you will get the *Medicare & You 2006* handbook, listing the Medicare prescription drug plans available in your area.

- You can get more information from local groups in your community that are working with Medicare to help you choose the drug coverage you need.
- You will be able to get personalized information to help you choose the plan that meets your needs at www.medicare.gov or by calling the toll-free number for Medicare, 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. Information is available in both English and Spanish.
- You can also get more information from your State Health Insurance Assistance Program.